



HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

FAX
STATE OF HAWAII
STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Matsunaga	Matthew	M	808-523-6061
MAILING ADDRESS (Street)			FAX 808-523-6030
745 Fort Street, Suite 1500			EMAIL MMATSUNAGA@SCHLACKITO.COM
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Schlack Ito			808-523-6040
MAILING ADDRESS (Street)			FAX 808-523-6030
745 Fort Street, Suite 1500			EMAIL MMATSUNAGA@SCHLACKITO.COM
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
PJY Enterprises, LLC			808-723-5708
MAILING ADDRESS (Street)			FAX
98-402 Koauka Loop, Unit 1503			EMAIL PJYENTERPRISES@AOL.COM
(City)	(State)	(Zip Code)	
Aiea	HI	96701	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Tracy T. Yoshimura			808-723-5708
MAILING ADDRESS (Street)			FAX
98-402 Koauka Loop, Unit 1503			EMAIL PJYENTERPRISES@AOL.COM
(City)	(State)	(Zip Code)	
Aiea	HI	96701	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input checked="" type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Matthew M. Matsumaga
(Signature of Lobbyist)

2/13/13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Tracy T. Yoshimura		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Manager	
NAME OF ORGANIZATION (if applicable) PJY Enterprises, LLC		TELEPHONE 808-723-5708	
MAILING ADDRESS (Street) 98-402 Koauka Loop, Unit 1503		FAX	
		EMAIL PJYENTERPRISES@AOL.COM	
(City) Aiea	(State) HI	(Zip Code) 96701	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

[Signature]
(Signature of Authorizing Officer or Person Represented)

2/13/13

(Date)